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JAN - 5 2011

K103618

## 510(k) Summary

### TurboHawk™ Peripheral Plaque Excision System

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of 21 C.F.R. § 807.92.

#### 1. Submitter Information

Applicant ev3 Inc.  
3033 Campus Drive  
Plymouth, MN 55441-2651  
Tel: 763-398-7000  
Fax: 763-591-3248

Contact Person Brenda Johnson  
Principal Regulatory Affairs Specialist

Date Prepared December 3, 2010

#### 2. Subject Device

Device Trade Name TurboHawk™ Peripheral Plaque Excision System

Device Common Name Catheter, Peripheral, Atherectomy

Classification Name Intraluminal Artery Stripper  
21 CFR 870.4875, Product Code MCW

Classification Panel Cardiovascular

#### 3. Predicate Devices

Device Trade Name TurboHawk™ Peripheral Plaque Excision System;  
SilverHawk™ Peripheral Plaque Excision System

510(k) Number K093301; K061188

510(k) Clearance Date November 6, 2009; October 23, 2006

#### 4. Device Description

The TurboHawk Peripheral Plaque Excision System (TurboHawk Catheter and ev3 Cutter Driver) is designed for the treatment of de novo and restenotic calcified and non-calcified atherosclerotic lesions located in native peripheral arteries. The TurboHawk Catheter consists of a flexible shaft designed to track over a 0.014" guidewire. At the distal end of the TurboHawk Catheter is a small cutting assembly comprised of a rotating inner cutter contained within a

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tubular housing. The proximal end of the TurboHawk Catheter contains a connector and cutter positioning lever (thumb switch) designed to fit into the ev3 Cutter Driver. The ev3 Cutter Driver is a handheld, disposable, battery-driven unit (Catalog No: 02550) which powers the system.

The TurboHawk Peripheral Plaque Excision System has two switches: 1) the SilverHawk Cutter Driver main power switch and 2) the TurboHawk Catheter thumb switch. The ev3 Cutter Driver main power switch supplies power to the device when turned ON. The TurboHawk Catheter thumb switch activates the drive shaft and engages the cutter when pulled proximally to the ON position. With the cutter engaged, the TurboHawk Catheter is slowly advanced across the lesion, shaving occlusive material from the artery. The excised tissue is captured and stored in the tip of the device. The cutting process is completed by advancing the TurboHawk Catheter thumb switch distally deactivating the drive shaft and disengaging the cutter. The TurboHawk Catheter thumb switch is fully advanced distally to the OFF position in order to pack the excised plaque into the tip. This cutting sequence is repeated as necessary to achieve the desired degree of plaque excision.

## **5. Indications for Use**

The TurboHawk Peripheral Plaque Excision System is intended for use in atherectomy of the peripheral vasculature. The TurboHawk Catheter is NOT intended for use in the coronary, carotid, iliac, or renal vasculature.

## **6. Comparison of Technological Characteristics**

The TurboHawk Peripheral Plaque Excision System has the following similarities to the predicate device:

- Identical indications for use
- Identical intended use as the predicate TurboHawk Peripheral Plaque Excision System
- Similar fundamental scientific technology
- Similar operating principle
- Similar materials

## **7. Performance Testing Summary**

To demonstrate substantial equivalence of the subject device, the TurboHawk Peripheral Plaque Excision System to the predicate device, the technological characteristics and performance criteria were evaluated. Using FDA Guidance Documents on non-clinical testing of medical devices and internal Risk Analysis procedures, the following in vitro tests were performed:

- Effective length
- Guidewire loading
- Cutter height
- Cycle and life
- Carbide edge attachment
- Proximal drive shaft joint torque test
- Distal drive shaft assembly torque test
- Distal drive shaft assembly tensile test
- Tip, hinge, and distal torque shaft joints tensile test
- Cutter stop tensile
- Trackability
- Cut depth

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- Cut mass per pass
  - Guidewire lumen zip
  - Embolization
  - Tissue removal cycles

Testing leveraged from the predicate TurboHawk Device included spin percentage, biocompatibility, packaging and sterilization. Test results met the specified acceptance criteria and were included in K093301.

The results from these tests demonstrate that the technological characteristics and performance criteria of the TurboHawk Peripheral Plaque Excision System are comparable to the predicate device and that the TurboHawk Peripheral Plaque Excision System performs in a manner equivalent to the predicate device currently on the market for the same intended use.

## **8. Conclusions**

Based on the intended use, technological characteristics, safety and performance testing included in this submission, ev3 considers the TurboHawk Peripheral Plaque Excision System to be substantially equivalent to the predicate TurboHawk Peripheral Plaque Excision System (K093301) and the predicate SilverHawk Peripheral Plaque Excision System (K061188).



DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
10903 New Hampshire Avenue  
Document Control Room - WO66-G609  
Silver Spring, MD 20993-0002

ev3, Inc.  
c/o Mr. Mark Job  
Reviewer  
Regulatory Technology Services, LLC  
1394 25<sup>th</sup> Street NW  
Buffalo, MN 55313

JAN - 5 2011

Re: K103618

Trade/Device Name: TurboHawk Peripheral Plaque Excision System

Regulation Number: 21 CFR 870.4875

Regulation Name: Intraluminal artery stripper

Regulatory Class: Class II (two)

Product Code: MCW

Dated: December 9, 2010

Received: December 10, 2010

Dear Mr. Job:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.


Page 2 – Mr. Mark Job

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to <http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm> for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to <http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address <http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,



Bram D. Zuckerman, M.D.  
Director  
Division of Cardiovascular Devices  
Office of Device Evaluation  
Center for Devices and  
Radiological Health

Enclosure

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**Indications for Use Statement**

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Prescription Use X  
(Part 21 CFR 801 Subpart D)

AND/OR

Over-The-Counter Use \_\_\_\_\_  
(21 CFR 801 Subpart C)

(PLEASE DO NOT WRITE BELOW THIS LINE-CONTINUE ON ANOTHER PAGE  
IF NEEDED)

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Concurrence of CDRH, Office of Device Evaluation (ODE)

Dennis E. Valmeyer  
(Division Sign-Off)  
Division of Cardiovascular Devices

510(k) Number K103618